SSuN Special Focus Report

Drug Use - STD Clinic Patients



September 2012

Overview

Through enhanced surveillance activities conducted as part of the STD Surveillance Network (SSuN), interviews were captured for 16,027 patient visits to three STD clinics in the Richmond, Virginia area from January 1, 2010 through June 30, 2012. These health department clinics were located in Richmond City, Henrico County, and Chesterfield County.

All patients presenting to these STD clinics were asked to complete a SSuN interview form during the registration process. This interview form solicits patient information on basic demographics as well as risk behaviors, including self-reported drug use within the past year. The drugs asked about include: marijuana, crack/cocaine, nitrates/poppers, heroin, methamphetamines (meth/crystal), sexual performance enhancing drugs, and any injection drug use.

Overall Illicit Drug Use by Clinic Patients

Overall, 32 percent of STD clinic patients reported some type of illicit drug use in the 12 months before their visit. Marijuana was the most commonly reported drug used, with use reported by 31% of all patients. Use of crack/cocaine was the second most frequently reported drug (3%). Very few patients (less than 1%) reported using heroin, methamphetamines, or injection drugs. The percent of patients reporting drug use has remained stable from 2010 to 2012.

Figure 1. Self-Reported Drug Use by STD Clinic

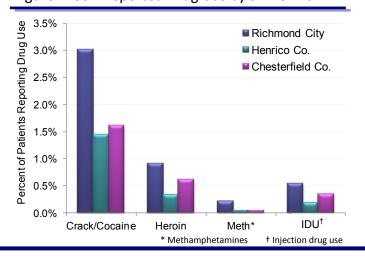
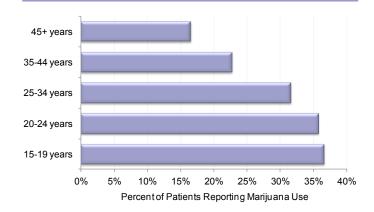


Figure 2. Self-Reported Marijuana Use by Age



Drug Use by STD Clinic

There were slight differences in patterns of drug use by STD clinic, with Richmond City patients reporting the highest frequency of drug use for all substances (Figure 1). For example, 3% of Richmond City patients reported using crack/cocaine in the previous 12 months, roughly twice the percentage reported by Henrico or Chesterfield County patients (1.4% and 1.6% respectively).

Drug Use by Patient Age

There were notable differences in drug use by age. Marijuana use was more common among younger ages, decreasing steadily from 37% among those aged 15-19 years to only 17% among those aged 45 years or older (Figure 2). Use of other drugs was generally more frequent among older patients, particularly crack/cocaine and performance enhancing drugs (Table 1).

Quick Data Summary

- * 31% of all STD clinic patients reported marijuana use in the 12 months preceding their clinic visit.
- *3% of patients reported crack/cocaine use.
- * Less than 1% of patients reported using heroin, methamphetamines, or injection drugs in the past year.
- * Marijuana use was highest among younger patients.
- * White, non-Hispanic patients reported the highest frequency of all types of illicit drug use.

Drug Use by Race/Ethnicity

Self-reported use of marijuana, crack/cocaine, heroin, methamphetamines, and injection drugs were all most common among White, non-Hispanic patients. Hispanic patients reported the lowest frequency of marijuana use (21%), while non-Hispanic Blacks and Whites reported relatively similar frequencies (31% and 34%).

Drug Use by Sexual Orientation

The SSuN interview form asks patients about their sexual orientation as well as the gender of their most recent sexual partners. This allows for the assessment of risk behaviors among important clinic subpopulations.

The highest frequency of marijuana use was among bisexual patients (44%), followed by men who have sex with women (40%), and men who have sex with men (35%). Women reported the lowest frequency of marijuana use (21%). Bisexual patients were also most likely to report use of crack/cocaine and injection drug use.

What is SSuN? A Quick Overview

The STD Surveillance Network (SSuN) is an enhanced surveillance project sponsored by the Centers for Disease Control and Prevention (CDC). The purpose of SSuN is to fill critical gaps in national surveillance and improve the capacity of national, state, and local sexually transmitted disease (STD) programs.

SSuN has two main components: STD clinic surveillance and *Neisseria gonorrhoeae* (NG) population surveillance. The former involves collecting enhanced information on patients presenting to STD clinics, while the latter involves interviewing patients diagnosed with gonorrhea in the general population. The data captured as part of SSuN include information not only on STD diagnoses, but also on patient demographics, disease symptoms, treatment, and high-risk behaviors.

Twelve sites across the United States now participate in these enhanced surveillance activities, including 42 STD clinics in 115 counties. Nationally, SSuN now captures information on approximately 20% of all gonorrhea cases diagnosed annually.

In Virginia, three localities participate in the SSuN project: Richmond City, Chesterfield County, and Henrico County. Enhanced surveillance data is captured for approximately 6,000 STD clinic visits and over 1,000 cases of gonorrhea each year in Virginia.

Table 1. STD Clinic Patient Self-Reported Drug Use by Demographics (January 1, 2010 - June 30, 2012)

	Total		Crack /		Metham-	Injection	Performance
Demographic	Interviews	Marijuana	Cocaine	Heroin	phetamines	Drug Use	Enhancing
Age Category							
15-19 years	721	36.6%	0.8%	0.4%	0.1%	0.4%	0.7%
20-24 years	5,572	35.8%	1.2%	0.3%	0.1%	0.2%	0.5%
25-34 years	6,145	31.6%	2.1%	0.7%	0.3%	0.5%	1.3%
35-44 years	2,097	22.7%	4.6%	1.9%	0.0%	0.7%	2.8%
45+ years	1,491	16.6%	7.7%	1.8%	0.2%	1.0%	6.6%
Race/Ethnicity							
Black, non-Hispanic	12,355	31.2%	2.1%	0.6%	0.1%	0.3%	1.6%
White, non-Hispanic	2,167	33.6%	5.5%	2.4%	0.8%	1.4%	2.3%
Hispanic / Latino	1,204	20.6%	2.3%	0.5%	0.1%	0.2%	0.7%
Other, non-Hispanic	296	31.4%	4.4%	0.3%	0.0%	0.3%	2.4%
Sexual Orientation							
MSM [*]	619	35.1%	4.2%	0.3%	0.5%	0.3%	2.6%
MSW [†]	6,624	40.3%	2.9%	1.0%	0.2%	0.5%	3.3%
Women	7,433	21.1%	1.7%	0.5%	0.1%	0.4%	0.1%
Bisexual [‡]	901	44.1%	7.3%	2.1%	0.3%	1.1%	2.1%
Transgender	21	28.6%	4.8%	4.8%	0.0%	0.0%	4.8%
Overall	16,027	30.7%	2.6%	0.8%	0.2%	0.5%	0.5%

^{*} Men who have sex with men

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[†] Men who have sex with women

[‡] Includes both men and women